

Authority: Rule 390.1132(1) of the
Administrative Rules Governing the
Certification of Michigan Teachers.
COMPLETION: VOLUNTARY.
(Certificate will not be issued if form is
not filed.)

Michigan Department of Education
OFFICE OF PROFESSIONAL PREPARATION SERVICES
P.O. Box 30008, Lansing, Michigan 48909

Direct questions regarding
this form to 517-373-3310.

APPLICATION FOR A THIRD RENEWAL OF A MICHIGAN PROVISIONAL CERTIFICATE

NOTE: This form is to be used by applicants who have met all requirements for the Professional or Occupational Education certificate, **EXCEPT** the three years of teaching experience, and have received an offer of employment from a Michigan public or private school.

INSTRUCTIONS:

- Complete items 1 through 3. **PLEASE PRINT OR TYPE.**
- Return **ONE** copy of the application to the **STATE** address indicated above.
- Upon receipt of your application, you will be billed the \$75.00 fee. Your application will not be reviewed until the fee payment has been posted.
THE FEE IS NOT REFUNDABLE.
- Request your employer to forward a letter to this office stating that you have been offered a regular teaching position (substitute teaching is not applicable) and the beginning date of employment.
- If you are an eventual candidate for the Professional Education certificate through a Michigan university, request your university to forward a letter to this office stating that you have met all the academic requirements for the Professional or Occupational Education certificate.
- If you have met all academic requirements for the Professional or Occupational Education certificate at an out-of-state university, a letter from the out-of-state university is not necessary. You must provide official transcripts with your application.

I APPLICANT INFORMATION *(Please type or print)*

Social Security Number	Name: Last/First/ Middle Initial	Maiden
Street Address (Home)	City, State	Zip Code
Telephone ()	Date of Birth	Sex 9 Male 9 Female

II EMPLOYING SCHOOL DISTRICT

Name of School District	Address	Contact Person	Phone
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III CONVICTION/REVOCATION INFORMATION

1. Have you ever been convicted of, pled no contest to, or pled guilty to a felony? (check one)	9 Yes 9 No
2. Have you ever been convicted of, pled no contest to, or pled guilty to a misdemeanor involving a minor? (check one)	9 Yes 9 No
3. Have you had a school psychologist certificate suspended or revoked? (check one)	9 Yes 9 No

Applicant's signature

Date

| DO NOT WRITE BELOW THIS LINE |

Institution	Degree	Date Issued 	Certificate Type
Fee Paid \$ _____ (CODE "1" IF ALL GRADES) ____ _ ____ _ SUBJECT FIELDS (Major, Minor, Endorsement)	Date Approved 	Approved by _____	APPROVED FOR: ___ Third Elementary Renewal ___ Additional Elementary Renewal ___ Third Secondary Renewal ___ Additional Secondary Renewal